UTILITY/DESIGN PATENT Docket No. S63.2-9867

DECLARATION

As a below-named inventor, I(we) hereby declare that:

	TYPE OF DECLARATION	
This declaration	is of the following type:	
8	original	
	design	
_	supplemental	
	national stage of PCT	
	divisional	
	continuation	
	continuation-in-part (CIP)	
	INVENTORSHIP DECLARATION	
	My residence, post office address, and citizenship are as stated below next to my name;	
	I verily believe I am the original, first and sole inventor (if only one name is listed below) or and joint inventor (if plural names are listed below) of the subject matter which is claimed and for the invention entitled:	
· .	HYBRID BALLOON EXPANDABLE/SELF EXPANDING STENT	
the specification	of which:	
a)	☑ is being filed concurrently herewith	
b)	was filed on and assigned Serial No	
c)		and
-,	amended under PCT Article 19 on	
	CIVALONIA ED CACEME OE DEVIEW OF DADEDC AND DIENY OF CANDOD	
£	CKNOWLEDGMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR	
specification, i	I hereby state that I have reviewed and understand the contents of the above identified cluding the claims, as amended by any amendment referred to above.	
application in	I acknowledge the duty to disclose information which is material to the examination of a	this

PRIORITY CLAIM

37 CFR 1.97.

In compliance with this duty there is attached an Information Disclosure Statement.

I hereby claim foreign priority benefits under Title 35, United States Code, §119(a)-(d), of any foreign application(s) for patent or inventor's certificate or of any PCT international applications(s) designating at least one country other than the United States of America listed below and have also identified below any foreign application for patent or inventor's certificate or any PCT international applications(s) designating at least one country other than the United States of America filed by me having the same subject matter having a filing date before that of the application on which priority is claimed.

COUNTRY	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 37 USC 119
			UYES UNO
			□ YES □ NO
			□ YES □ NO
			□ YES □ NO

I hereby claim the benefit under Title 35 United States Code, §119(e) of any United States provisional application identified below.

U.S. APPLICATIONS				
APPLICATION NUMBER	U.S. FILING DATE			
1.	:			
2.				

CLAIM FOR BENEFIT OF EARLIER U.S./PCT APPLICATIONS(S) UNDER 35 U.S./C. §120

I hereby claim the benefit under Title 35, United States Code, §120 of any United States applications(s) or PCT international applications(s) designating the United States of America that is/are listed below.

U.S. APPLICATIONS				
	APPLICATION NUMBER	U.S. FILING DATE		
1.				
2.				
PCT APPLICATIONS DESIGNATING THE U.S.				
	PCT APPLICATION NO.	PCT FILING DATE		
3.				

I hereby declare that all statements made herein of my knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Telephone calls and correspondence should be directed to: <u>Jonathan Grad</u>, at <u>Customer</u> No. 490, Telephone: (952) 563-3000, Facsimile: (952) 563-3001.

First Inventor		Second Inventor	
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Inventor's signature;	hhth.	Inventor's signature:	<u> </u>
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(If different than above)		(If different than above)	:

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UTILITY/DESIGN PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Bashiri inventor(s): HYBRID BALLOON EXPANDABLE/SELF Title: EXPANDING STENT concurrently herewith Filed: а and assigned Scriul No.

Commissioner for Patents Washington, DC 20231

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Docket No: S63.2-9867

POWER OF ATTORNEY FROM ASSIGNEE

As assignee of record of the entire interest of the above identified patent application. SeiMed Life Systems, Inc. hereby appoint all practitioners of Customer No. 490 to proscente this application and to transact all business in the Patent and Trademark Office connected therewith. I hereby authorize them to act and rely on instructions from, and to communicate directly with, the firm or person which sent this case to Vidas, Arrett & Steinkreus, P.A., unless or until I instruct Vidas, Arrett & Steinkreus P.A., in writing to the contrary.

Address all correspondence to Jonathan Grad at Customer Number 420.

Dated this

SelMed L By:

Albert Kau Patent Counsel In: